

## **IC 27-8-22**

### **Chapter 22. Patient Billing**

#### **IC 27-8-22-1**

##### **"Health care provider" defined**

Sec. 1. As used in this chapter, "health care provider" has the meaning set forth in IC 34-18-2-15.

*As added by P.L.1-1994, SEC.139. Amended by P.L.1-1998, SEC.152.*

#### **IC 27-8-22-2**

##### **"Claim information" defined**

Sec. 2. As used in this chapter, "claim information" means the following:

(1) A notice that a claim has been filed with a patient's third party payor.

(2) A copy of an itemized bill for services when submitted to the third party payor.

*As added by P.L.1-1994, SEC.139.*

#### **IC 27-8-22-3**

##### **"Representative" defined**

Sec. 3. As used in this chapter, "representative" has the meaning set forth in IC 16-36-1-2.

*As added by P.L.1-1994, SEC.139.*

#### **IC 27-8-22-4**

##### **Providing copy of claim information to patient**

Sec. 4. (a) A health care provider shall routinely provide to a patient or the patient's representative, upon request, a copy of the claim information for health care services to the patient that the health care provider submits to the patient's insurance company, Medicare, or other third party payor except Medicaid.

(b) A health care provider is not required by this section to provide the patient with more than one (1) copy of a patient's claim information.

*As added by P.L.1-1994, SEC.139.*